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FEB 23 2005

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24131 7590 11/18/2004

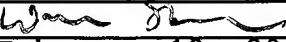
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WERNER STEMER	(Depositor's name)
	
(Signature)	
February 18, 2005	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/045,835	01/11/2002	Klaus List	2814/1-44	2848

TITLE OF INVENTION: METHOD AND DEVICE FOR GENERATING AN AEROSOL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685 700	\$300	\$985 1,000	02/18/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
METZMAIER, DANIEL S	1712	516-007000			

<p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</p> <p><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</p>	<p>2. For printing on the patent front page, list</p> <p>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,</p> <p>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</p>
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1 Laurence A. Greenberg
2 Werner H. Steamer
3 Ralph E. Locher

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Buender Glas GmbH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Buende, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-1099 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Werner H. Steamer

Date 2/18/05

WERNER H. STEMER

REG. NO. 34,956

Typed or printed name WERNER H. STEMER

Registration No. _____

REG. NO. 34,956

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